

**VIRGINIA: IN THE CITY OF RICHMOND GENERAL DISTRICT
COURT
CIVIL DIVISION
Second Floor John Marshall Courts Building
400 N. 9th Street – Suite 203
Richmond, VA 23219-1546**

Conchita M. Turpin)
Plaintiff,)
)
v.) Case No. GV08042145-00
)
The Wellpoint Companies Inc.)
Defendant.)

BILL OF PARTICULARS

COMES NOW the Plaintiff, Conchita M. Turpin - Pro Se, and moves the Court for judgment against the Defendant for the following reasons:

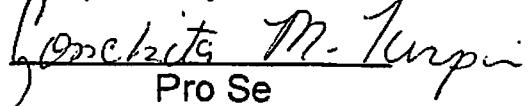
1. On May 8, 2007, I was wrongfully discharged from my employment with the Wellpoint Companies, Inc., said reason was "No Call, No Show".
2. On May 8, 2007, I filed a complaint with EEOC against the Wellpoint Companies for damages totaling over \$25,000.

3. On or about August 28, 2007, plaintiff received a Notice of Suit Rights from the EEOC.
4. On November 13, 2007, plaintiff filed a motion in the John Marshall City of Richmond General District Court for wrongful termination, case no. 07-65817.
5. On or about December 7, 2007, defendant responded.
6. On February 21, 2008, the Wellpoint Companies, Inc. offered the plaintiff a settlement in the amount of \$7500.00
7. On or about March 12, 2008, the Wellpoint Companies breached the contractual agreement made between us (plaintiff and defendant) by sending the plaintiff a payroll check (check no. 168672), in the amount of \$4636.54, which was \$2863.46 less than the amount that the plaintiff agreed upon, instead of a settlement check in the amount of \$7500.00.
8. On or about March 12, 2008, defendant sent plaintiff a payroll check with deductions charging plaintiff for medical insurance and for disability insurance after plaintiff had already been terminated over ten months.

9. Defendant has given false information, in stating that the plaintiff had been re-instated as a Wellpoint Companies employee. Plaintiff was never re-instated.
10. Plaintiff is eligible for severance pay for 13.25 weeks in the amount of \$5995.04, and make a claim for it in this action.
11. Defendant has caused plaintiff to suffer emotional distress and financial hardship.

WHEREFORE, the Plaintiff moves this Court for judgment against the Defendant in the amount of \$10,000.00 plus 6% interest from the 8th day of May 2007, until paid and other consequential damages. The Plaintiff also moves this Court for judgment against the Defendant for fraud, in the amount of \$5000.00 with 6% interest from the 8th day of May 2007, until paid, plus attorney fees and punitive damages. Plaintiff request trial by jury.

Respectfully Submitted


Conchita M. Turpin
Pro Se

Conchita M. Turpin
41A Craighill Rd.
Richmond, VA 23238
804-477-5488

BILL OF PARTICULARS

Commonwealth of Virginia Rule 7B:2

Case No.

10/28/08 - 11AM

TRIAL DATE AND TIME

Sandra C. Blount, Clerk
Richmond General District Court
Civil Division CITY OR COUNTY
John Marshall Courts Building
400 North 9th Street - Suite 203 STREET ADDRESS OF COURT
Richmond, Virginia 23219-1546

DEFENDANT

PLAINTIFF

v.

TO THE PLAINTIFF:

You are required to file, and serve by mailing, a written bill of particulars by

DATE

You are further required to fully state, in the numbered paragraphs below, each of the reasons/grounds why you think the defendant owes you the money or property claimed. You may attach additional paper if needed.

1.

2.

3.

4

5.

[] See continuation sheet.

NOTICES: Failure to comply with this order may be grounds for awarding summary judgment in favor of the adverse party. This is not evidence. Both parties still must be prepared, at trial, to prove their case with admissible evidence. Upon trial, the judge may exclude evidence as to matters not described in this pleading.

CERTIFICATE OF MAILING BY PLAINTIFF

I certify I mailed a completed copy of this Bill of Particulars to the clerk of this court and to each attorney for the defendant, or to the defendant if not represented, this _____ day of _____, 20____.

BP due 9/3/08
CD due 9/24/08

SIGNATURE OF PLAINTIFF

[View a Different Payment](#)**OFFICIAL COPY**

The WellPoint Companies, Inc.

120 Monument Circle
Indianapolis, IN 46204

Pursuant to the E-Government Act
the original of this page has been filed
under seal in the Clerk's Office

Pay Group:	Non-Exempt	Advice #:	6010892
Pay Begin Date:	02/19/2007	Advice Date:	03/09/2007
Pay End Date:	03/04/2007	Net Pay:	\$536.0

CONCHITA M TURPIN
910 C PALACE WAY
RICHMOND, VA 23238

SSN: [REDACTED]
Associate ID: 055974

Company: 055
CostCenter: DMS VA
Location: ATH-Davis Center N.,Rich VA
Job Title: DM Clerk II
Pay Rate: \$11.19 Hourly

TAX DATA: Federal State : VA
Marital Status: Single Married
Allowances: 1 0
Addl Percent:
Addl Amount:
Specl Tax Stat: None None

Hours and Earnings					
Description	Curr Hours	Rate	Curr Earnings	YTD Hours	YTD Earnings
Reg Time	80.00	11.199453	895.96	352.50	3,947.81
Med Credit			141.81		709.05
Den Credit			10.18		50.90
Lif Credit			4.57		22.85
LTD Credit			3.67		18.35
Vis Credit			1.74		8.70
Gift Cert					32.48
PTO EARN H				27.00	302.39
HOL HRLY				24.00	268.79
NON SCH H				0.50	5.60
Total:	80.00		1,057.93	404.00	5,366.92

Taxes		
Description	Current Amount	YTD Amount
Fed Withholding	72.94	414.47
Fed MED/EE	12.85	65.38
Fed OASDI/EE	54.96	279.57
VA Withholding	30.31	169.39
Total:	171.06	928.81

The WellPoint Companies, Inc.

120 Monument Circle
Indianapolis IN 46204

CONCHITA M TURPIN 910 C PALACE WAY RICHMOND VA 23238	Company: 055 CostCenter-RS: DMS VA Location: Job Title: DM Clerk II Pay Rate: \$11.311448 Hourly	Pay Group: Non-Exempt Pay Begin Date: 03/03/2008 Pay End Date: 03/16/2008	Check #: 168672 Check Date: 03/12/2008
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HOURS AND EARNINGS

Description	Current Hours	Earnings	Hours	YTD Earnings	TAXES		
					Description	Current	YTD
Settlement		7500.00		7,500.00	Fed Withholding	1,875.00	1,875.00
					Fed MED/EE	108.75	108.75
					Fed OASDVEE	465.00	465.00
					VA Withholding	414.71	414.71

Total:	0.00	7,500.00	0.00	7,500.00	Total:	2,863.46	2,863.46
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BEFORE-TAX DEDUCTIONS

BEFORE-TAX DEDUCTIONS	AFTER-TAX DEDUCTIONS	EMPLOYER PAID BENEFITS
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Description	Current	YTD	Description	Current	YTD	Description	Current	YTD

Total:	0.00	0.00	*Taxable
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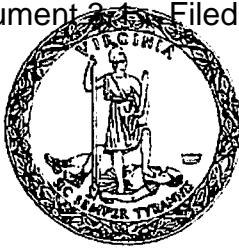
TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
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Current: 7,500.00	7,500.00	2,863.46	0.00	4,636.54
YTD: 7,500.00	7,500.00	2,863.46	0.00	4,636.54

LEAVE ACCRUAL	YTD	STATE/LOCAL	TAXABLE	CURRENT	YTD	NET PAY DISTRIBUTION
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		VA	7,500.00	7,500.00		Check 168672 4636.54
--	--	----	----------	----------	--	----------------------

00000000000000	Total:	4636.54
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RR 3 Box 181-C
Grundy VA 24614

(B66) 832-2363 LDN: 111
(276) 935-7712/FAX

CLAIMANT NAME AND ADDRESS
CONCHITA M TURPIN
41A CRAIGHILL RD
RICHMOND VA 23238

PROGRAM: 01 BYE: 05/03/08
LTRN: 01
LAST 30 DAY/240 HOUR EMPLOYER
THE ANTHEM COMPANIES INC
TALX UCM SERVICES, INC
P O BOX 283
ST LOUIS MD 63166 0283

(14466) NC 438-2010-01164

YOU ARE HEREBY NOTIFIED THAT BASED ON FACTS OBTAINED IN CONNECTION WITH YOUR CLAIM FOR UNEMPLOYMENT COMPENSATION FILED ON 05/06/07 THE UNDERSIGNED DEPUTY PURSUANT TO SECTION 60.2-61B(2) OF THE VIRGINIA UNEMPLOYMENT COMPENSATION ACT (AS SHOWN ON BACK) RENDERS THE FOLLOWING DETERMINATION:

CLAIMANT QUALIFIED EFFECTIVE 05/06/07

ON MAY 8, 2007 YOU WERE DISCHARGED FROM YOUR POSITION WITH THE ABOVE EMPLOYER DUE TO UNACCEPTABLE ATTENDANCE.

THE VIRGINIA UNEMPLOYMENT COMPENSATION ACT PROVIDES A DISQUALIFICATION IF IT IS FOUND A CLAIMANT WAS DISCHARGED FOR MISCONDUCT IN CONNECTION WITH WORK. IT HAS BEEN CONSISTENTLY HELD THAT WILLFUL UNEXCUSED AND CHRONIC ABSENTEEISM OR HABITUAL TARDINESS IN REPORTING FOR WORK WITHOUT ADEQUATE JUSTIFICATION CONSTITUTES MISCONDUCT CONNECTED WITH WORK.

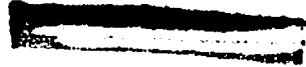
YOU STATED YOU CALLED OUT ON MAY 4, 2007 BECAUSE YOUR VEHICLE WOULD NOT RUN. YOU THEN HAD TO HAVE YOUR VEHICLE TOWED TO THE AUTO SERVICE SHOP TO BE REPAIRED. ON MAY 7, 2007 YOU CALLED AND STATED YOU WOULD BE LATE FOR WORK BECAUSE YOU NEEDED TO PICK UP YOUR VEHICLE. YOU FURTHER STATED YOU WERE NEVER WARNED REGARDING ATTENDANCE ISSUES.

BASED ON THE INFORMATION PROVIDED IT IS THE DETERMINATION OF THE DEPUTY THAT YOUR EMPLOYER HAS NOT PROVIDED EVIDENCE SUFFICIENT TO SHOW MISCONDUCT TO THE EXTENT OF DENYING BENEFITS BECAUSE YOU DID CALL OUT AND THERE HAD BEEN NO PRIOR WARNINGS FOR ATTENDANCE ISSUES. YOU ARE, THEREFORE, QUALIFIED FOR BENEFITS.

RECEIVED
NOV 10 2010

V. WEISS DEPUTY, VIRGINIA EMPLOYMENT COMMISSION

IF YOU DISAGREE WITH THIS DECISION, YOU HAVE THE RIGHT TO FILE AN APPEAL. YOUR APPEAL RIGHTS ARE EXPLAINED ON THE REVERSE OF THIS FORM. PLEASE READ THEM CAREFULLY.



05/16/2007 15:56 804-6463769

WEST END

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11

Conchita M. Turpin
910C Palace Way
Richmond, VA 23238
804-477-5488

THURSDAY, NO

May 16, 2007

438 2010-01164

Commonwealth of Virginia
3501 Lafayette Blvd
Fredericksburg, VA 22401

To Whom It May Concern:

I am writing to appeal recent termination as a Data Entry Operator with Wellpoint/Anthem. The reason given by the department manager, Paul Thomas, was "No Call, No Show." However, as a seven-year veteran associate, I followed department/company procedures in the event of a personal emergency and in fact called in. I have documents to counter his claim and support my action.

Enclosed please find a copy of the cellular phone record listing the company phone number dialed and length of call and the auto repair work order. My home address is not on the bus line and I only own one vehicle. It was imperative that I take the day off to get my car repaired.

I look forward to speaking with you about this matter.

Sincerely,

Conchita M. Turpin
Conchita M. Turpin

RECEIVED
NOV 10 2010



Conchita Turpin <conchita.turpin@gmail.com>

Thank you for submitting resume

2 messages

Vurv@acs.com <Vurv@acs.com>
To: conchita.turpin@gmail.com

Wed, Aug 25, 2010 at 11:16 AM

Dear Conchita,

Thank you for submitting your resume. It has been added to our database and should a suitable position become available we will contact you!

Conchita Turpin <conchita.turpin@gmail.com>
Draft To: Vurv@acs.com

Thu, Sep 2, 2010 at 3:45 PM

[Quoted text hidden]



November 10, 2010

Job Search with The Wellpoint Companies has an Agency by The Name ACS, INC for The Data Management Service (Data Entry) department. I was sent to Human Resources to apply for the job through Wellpoint by manager, however I was told that I was ineligible for rehire due to "No call, No show".

Since my wrong full termination back in May 8, 2007 I hope to be compensated for my rights. (See charged file)

P.S.

Copies of papers Signed from Wellpoint Companies prior to me receiving Settlement CHECK VS PAYROLL CHECK

WITNESS: Internal Revenue Corrected me, that the check that I received (check No. 168672) in the amount of \$4636.54, I would need to present W2's to file my taxes. (H&R Block tax papers were put on hold) I have proof of concern by IRS.

WITNESS: Legal Aid Society, Attorney Patrick Lavell

WITNESS: Virginia Employment Commission

documentation - Hearing 2007, Rules In Conchita Turpi.

FAVOR:

Labor Attorney (Bob Shiel) Interview me
He Recognized that I did try to get my job back.

I will provide these documentations if needed.

This has been a real experience for me. Now presently, I am unemployed, homeless and the only income I have at this time is the EBT card of \$200.00 only.

I have no money to pay an attorney and Legal Aid claims my daughter makes too much money even though she has a child.

Please assist me accordingly, I need to represent myself.

Conchita M. Turpi

Cell # 397-1232

(Witness: Coworker Return basic to work, same situation - She had attorney I have not been compensated No job and No settlement
(R. T. Twp) 111

Page 3 November 10, 2010

Witness: Co-worker Tim Drummond

804 354

303-3425



SSN: [REDACTED] NAME: CONCHITA M TURPIN
 NO. OF OVERPAYMENTS: 3 NO. OF REPAYMENTS: 18
 OVERPAYMENT # 3

BENEFIT PROGRAM CODE: 01 LIABLE STATE: 51
 BENEFIT YEAR BEGINS : 05/06/07 BYE : 05/03/08 LOCAL OFFICE: 111
 FIRST OVERPAID BWE : 06/16/07 LAST BWE : 07/07/07 NO. OF WEEKS: 4
 DISCOVERY DATE : 10/05/07 WKS AUDIT : 0 CA REFER DATE: 00/00/00
 ESTABLISHED DATE : 10/05/07 DEPUTY : 00000000 CAR CODE: 00
 OVERPAYMENT CLASS : F SOURCE : Y CAUSE: 10
 LEGAL STATUS : INACTIVE FLAG : INACTIVE DATE: 00/00/00
 MONTHLY DUE DATE : 00 MONTHLY AMOUNT : .00 DECISION DATE: 10/11/07
 DISPOSITION : A DISPO DATE : 10/05/07 LEGAL STATUS EFF: 00/00/00
 ALTERNATE SSN : OVERPAID AMOUNT: 669.00 DEP BEGIN: 10/08/07
 AGREEMENT TYPE : 0 OFFSET AMOUNT : 299.00 INVST RPT DATE: 00/00/00
 VENUE FIPS : 000 RECOUP AMOUNT : .00 ACTIVITY CODE:
 TAX SETOFF INDICATOR: BALANCE AMOUNT : 370.00 ACTIVITY DATE: 00/00/00
 OFFSET : 1 AVAILABLE TAX AMT: .00
 IRORA - 1 >>> FIPS : 00 STATUS CODE : DATE SENT: 00/00/00 BAL : .00
 IRORA - 2 >>> FIPS : 00 STATUS CODE : DATE SENT: 00/00/00 BAL : .00
 IRORA - 3 >>> FIPS : 00 STATUS CODE : DATE SENT: 00/00/00 BAL : .00

FOR MORE OVERPAYMENT DATA DEPRESS PF2/PF8 TRANSACTION OPTION:

Oppal Date

Start Date
to appeal

11-07

Bob Shultz
674-2351

NOV 10 2010

4-1-10 - Walk In
4-21-10 - Phone Hearing

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC Agency(ies) Charge No(s): 438-2010-01152	
Virginia Council on Human Rights and EEOC <small>State or local Agency, if any</small>			
Name (indicate Mr., Ms., Mrs.) Ms. Conchita M. Turpin		Home Phone (Incl. Area Code) (804) 285-0089	Date of Birth [REDACTED]
Street Address 41 Craighill Road, Apt. A, Richmond, VA 23238		City, State and ZIP Code	
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name GCA SERVICES GROUP, INC.		No. Employees, Members 500 or More	Phone No. (Include Area Code) (804) 340-3444
Street Address Altria/Phillip Morris Bldg., W. Broad Street, Richmond, VA 23220		City, State and ZIP Code <small>SEP 1 2010</small>	
Name		No. Employees, Members	Phone No. (Include Area Code) <small>PM 12/17/2010</small>
Street Address		City, State and ZIP Code <small>LC 12/17/2010</small>	
DISCRIMINATION BASED ON (Check appropriate box(es).)			
DATE(S) DISCRIMINATION TOOK PLACE <small>Earliest: 08-13-2010 Latest:</small>			
<input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN		<input type="checkbox"/> CONTINUING ACTION	
<input type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION			
<input type="checkbox"/> OTHER (Specify)			
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):			
<p>I began employment with GCA Services as a janitorial employee at the above-referenced location in January 2009. On May 20, 2010, I went on medical leave of absence ("FMLA") due to physical injury. On August 13, 2010, my employment was terminated after my employer refused to permit me to return to my regular work location. Instead, I was offered a different location, which would have caused me to lose benefits related to my disability.</p>			
<p>A letter dated August 13, 2010, from Philip Gilbert, Human Resources Director, states:</p>			
<p>"On May 20, 2010, you went out on FMLA for personal health reasons. As recent as August 6, 2010, GCA Corporate Benefits Department requested that you provide GCA with an update of your status. On August 10, 2010, GCA confirmed that you had been released by your treating Physician on July 13, 2010 to work with no restrictions. Your failure to return . . . is considered job resignation [and] abandonment. . . ."</p>			
<p>I believe I was discriminated against as described above in violation of the Americans with Disabilities Act of 1990, as amended.</p>			
<p>I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.</p>		NOTARY – When necessary for State and Local Agency Requirements <p>I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.</p>	
<p>I declare under penalty of perjury that the above is true and correct.</p>		<p>SIGNATURE OF COMPLAINANT</p>	
<p>Sep 08, 2010</p>	<p><i>Conchita M. Turpin</i></p>		
Date	Charging Party Signature		
SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE <small>(month, day, year)</small>			

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To FEPA EEOC Agency(ies) Charge! No(s):
the original of this page has been filed
under seal in the Clerk's Office.
438-2010-01164

Virginia Council On Human Rights

and EEOC

State or local Agency, if any

Name (indicate Mr., Ms., Mrs.)

Ms. Conchita M. Turpin

Home Phone (Incl. Area Code)

(804) 285-0089

Date of Birth

Street Address

City, State and ZIP Code

41 Craighill Road Apt A, Richmond, VA 23238

Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)

Name	No. Employees, Members	Phone No. (Include Area Code)
THE WELLPOINT COMPANIES INC.	500 or More	(804) 354-7135

Street Address

City, State and ZIP Code

Anthem Blue Cross And Blue Shield, 2221 Edward Holland Drive, Richmond, VA 23230

Name	No. Employees, Members	Phone No. (Include Area Code)
------	------------------------	-------------------------------

Street Address

City, State and ZIP Code

DISCRIMINATION BASED ON (Check appropriate box(es).)

RACE COLOR SEX RELIGION NATIONAL ORIGIN
 RETALIATION AGE DISABILITY GENETIC INFORMATION
 OTHER (Specify) _____

DATE(S) DISCRIMINATION TOOK PLACE
Earliest _____ Latest _____

09-10-2010

 CONTINUING ACTION

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s):)

I was hired in March 2000, and recently employed as a Data Entry Operator. On or about May 8, 2007, I was discharged. I filed an EEOC charge against the company alleging discriminatory practices. In March 2008, I entered into a settlement agreement with the Company. On or about August 2010, I applied online for a control data entry clerk position. On or about September 10, 2010, Debbie Barnett, Human Resources Manager advised me that I would not be rehired and/or reinstated.

Debbie Barnett told me that I was ineligible for rehire due to a "No Call, No Show" discharge.

I believe that I was not rehired and/or being considered for reinstatement in retaliation for filing an EEOC charge, and my involvement in protected activity, in violation of Title VII of the Civil Rights Act of 1964, as amended.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct.

Sep 13, 2010

Charging Party Signature

NOTARY - When necessary for State and Local Agency Requirements

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE
(month, day, year)

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To: FEPA EEOC Agency(s): Charge No(s): Under seal in the Clerk's Office

438-2007-01296

Virginia Council On Human Rights

and EEOC

State or local Agency, if any

Name (indicate Mr., Ms., Mrs.)

Ms. Conchita M. Turpin

Home Phone (Incl. Area Code)

(804) 285-0089

Date of Birth

Street Address

City, State and ZIP Code

41 Craighill Road Apt A, Richmond, VA 23238

Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)

Name	No. Employees, Members	Phone No. (Include Area Code)
ANTHEM HEALTH PLANS OF VIRGINIA, IN	500+	(804)354-7090

Street Address

City, State and ZIP Code

2235 Staples Mill Road, Richmond, VA 23230

Name	No. Employees, Members	Phone No. (Include Area Code)
------	------------------------	-------------------------------

Street Address

City, State and ZIP Code

DISCRIMINATION BASED ON (Check appropriate box(es).)

DATE(S) DISCRIMINATION TOOK PLACE
Earliest Latest

05-08-2007

RACE COLOR SEX RELIGION NATIONAL ORIGIN
 RETALIATION AGE DISABILITY OTHER (Specify below.)

CONTINUING ACTION

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):

I was hired on or about March 12, 2000, as a data entry operator. On or about 2005, Paul Thomas was assigned as my supervisor. During my tenure, I performed well and always met my production. Mr. Thomas often kept a closer scrutiny on the production of me and older employees. Mr. Thomas accused me of using two hours of idle time. I advised Jackie McCullen, Manager, to review my production as well as Wanda McClellan, Manager, and the reports reflected my idle time to be extremely low and my production high. On or about May 1, 2007, there was a meeting and Mr. Thomas announced there was a freeze on paid time off (PTO). On or about May 4, 2007, I called Mr. Thomas and left a message that I was experiencing car trouble and I would be in the following work day. On or about May 7, 2007, I called in that I would be late because I was picking up my vehicle from the shop. On May 8, 2007, I was discharged without warning, or prior write ups.

Mr. Thomas stated I was discharged for no call, no show and gave no reason I was not warned instead of discharged.

I believe that I was harassed and discharged because of my age, 48, in violation of the Age Discrimination in Employment Act of 1967, as amended.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

NOTARY – When necessary for State and Local Agency Requirements

I declare under penalty of perjury that the above is true and correct.

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

7-30-07 Conchita M. Turpin
Date Charging Party Signature

SUBSCRIBED AND SWEORN TO BEFORE ME THIS DATE
(month, day, year)

DISMISSAL AND NOTICE OF RIGHTS

To: Conchita M. Turpin
41 Craighill Road Apt.# A
Richmond, VA 23238

From: Richmond Local Office
830 East Main Street
Suite 600
Richmond, VA 23219

On behalf of person(s) aggrieved whose identity is
CONFIDENTIAL (29 CFR § 1601.7(a))

EEOC Charge No. EEOC Representative

Telephone No.

438-2007-01296 Tonya A. Lennox,
Investigator (405) 231-4354

THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:

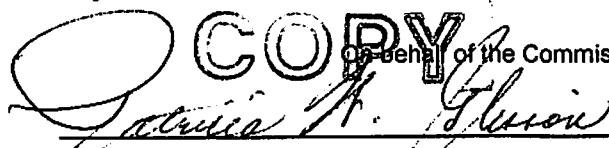
- The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.
- Your allegations did not involve a disability as defined by the Americans with Disabilities Act.
- The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.
- Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge.
- Having been given 30 days in which to respond, you failed to provide information, failed to appear or be available for interviews/conferences, or otherwise failed to cooperate to the extent that it was not possible to resolve your charge.
- While reasonable efforts were made to locate you, we were not able to do so.
- You were given 30 days to accept a reasonable settlement offer that affords full relief for the harm you alleged.
- The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude that the information obtained establishes violations of the statutes. This does not certify that the respondent is in compliance with the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge.
- The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.
- Other (briefly state)

- NOTICE OF SUIT RIGHTS -

(See the additional information attached to this form.)

Title VII, the Americans with Disabilities Act, and/or the Age Discrimination in Employment Act: This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit must be filed WITHIN 90 DAYS of your receipt of this Notice; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a state claim may be different.)

Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.

 **COPY**
on behalf of the Commission

AUG 28 2007

Enclosure(s)

Patricia W. Glisson,
Director

(Date Mailed)

cc: Lorraine Claiborne
Human Resources Consultant, Sr.
ANTHEM WELLPOINT
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